



In the United States Patent and Trademark Office
Before the Board of Patent Appeals

*~Respectfully, this application has been made special and
is therefore entitled to immediate action. Thank you.~*

Appn. Number: 09/832,440 Appn. Filed: 2001 April 11

Applicant: Steve Morsa Examiner: Jonathan Ouellette Art Group: 3629

Title: Method and Apparatus for the Furnishing of Benefits Information and Benefits

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Steve Morsa

Applicant/Appellant Appeal Brief

In 72 Pages including Claims & Appendixes; exclusive of Exhibits.

This is in response to Examiner's Non-Final Action mailed 07/20/2010.

No new matter has been added by way of this Brief.

- (1) Real party in interest:** Inventor/Applicant/Appellant; Steve Morsa
- (2) Related appeals and interferences:** None
- (3) Status of claims:** Claims 1-180 have been cancelled and claims 181-272 have been added. Claim 270 has been cancelled. Therefore, Claims 181-269 and 271-272 are now pending in the application.

Claim 269 has been allowed. Claims 182, 185, 204, 207, 226, 229, 248, and 251 have been objected to but considered allowable by Examiner if rewritten in independent form.

It is respectfully noted that though claims 181, 183, 184, 186-203, 205, 206, 208-225, 227, 228, 230-247, 249, 250, 252-268, 271, and 272 have been indicated as having been rejected in the 07/20/2010 mail date Office Action (hereinafter, "OA") Summary (# 6), that; as per Examiner's paragraphs # 40, 42, and 43 on pages 9-10 of said OA; claims 183, 186, 187, 205, 208, 209, 227, 230, 231, 249, 252, and 253 have in fact also been deemed allowable if rewritten in independent form.

Accordingly, the claims which are believed to have been rejected by Examiner; and which are in any case argued by Examiner within the body of the OA; and which are the subject of this appeal apparently are: **181, 184, 188-203, 206, 210-225, 228, 232-247, 250, 254-268, 271, and 272.**

Applicant respectfully requests notification and an opportunity to respond should such not be the case.

(4) Status of amendments: None.

(5) Summary of claimed subject matter: Per 41.37(c)(1), unrepresented/ pro se inventor/appellant is exempt.

(6) Grounds of rejection to be reviewed on appeal: Per 41.37(c)(1), unrepresented/ pro se inventor/appellant is exempt.

(7) Argument:

Applicant respectfully submits without prejudice the following:

Grouping of Claims

1. For purposes of this appeal, the claims should be grouped as follows:
 - A) 181, 184, 188-203, 206, 210-224 are firstly patentably distinct as they are directed to and teach benefit matching for human beings. These claims are argued separately and do not stand or fall together.
 - B) 225, 228, 232-247, 250, 254-268 are firstly patentably distinct as they are directed to and teach benefit matching for businesses, governments, educational institutions, non-profit organizations (i.e. non-human entities). These claims are argued separately and do not stand or fall together.
 - C) 270-272 are firstly patentably distinct as they are directed to and teach benefit matching for all entity types. These claims are argued separately and do not stand or fall together.

Response to Specification Objection

2. Regarding Examiner's OA # 3 on p.3; without addressing or taking a position on whether or not amendment (RCE) filed 5/22/2006 does or does not introduce new matter into the disclosure; Applicant nevertheless hereby agrees to cancel those/that part/s of the specification in said amendment which Applicant believes that Examiner believes to be and/or contain new matter. This authorization has been made previously, e.g. in the 05/14/2008 Appeal Brief.

Applicant accordingly kindly requests that the appropriate department/ division of the PTO institute the reversion of the following sections of the application to their originally-filed (4/11/2001) verbiage: Title, Abstract, Technical Field, Background of the Invention, Detailed Description including Example. *Thank you.*

Invalid Subject Matter: All Claims Allowable

3. Applicant is submitting with this brief a previously noted, two page press release (Evidence Appendix; Exhibit A) which reveals that—contrary to the Examiner relied on, allegedly-dated 9/28/1999 PMA press release—HelpWorks Web Edition was actually not disclosed (publicly posted) nor available until on or about the April 24th, 2001 date of applicants-supplied press release; over a full year *after* applicants 4/12/2000 priority date.

Inasmuch as *both* alleged press releases are sourced from Business Wire via Dialog; the same exact services relied upon by Examiner; there is an obvious serious question of just when Web Edition was publicly disclosed.

Actual, real, operating, and obviously well-respected (from the positive comments [per press release] of their customers; including Minnesota and New Jersey government agencies) companies like Peter Martin wouldn't dare claim to introduce/launch new products and/or services at different times; and further much less so over 1½ years apart (9/28/1999 vs 4/24/2001).

Examiners statement (OA # 45, p.10-11) that both alleged PMA press releases are similar but different from each other is correct as far as it goes. But the time-critical critical question here cannot be determined from the exact words or their number, but instead the fact that both alleged press releases are announcing the same exact product.

The HelpWorks Web Edition service obviously, logically, and most certainly *can't* be brand new . . . twice.

4. In addition, the following applicable sections of Business Wire's Terms of Use (TOU); taken directly from the Business Wire website on 4/11/2007; alerts users to the risks and dangers of, and the inherent questionable accuracy and reliability of, its very own data:

You agree that use of the Site is entirely at your own risk. Except as specifically provided in this agreement, the site and materials on the site are provided as is, without warranties or conditions of any kind, either express or implied, including, without limitation, the implied warranties of merchantability, fitness for a particular purpose, or non-infringement. Business Wire does not make any representations or warranties that the Site or materials on the Site or products and services purchased at or through the Site will meet your requirements or expectations, or that the operation of the Site will be uninterrupted, timely, secure or error-free. Some jurisdictions do not allow the exclusion of certain warranties, so some or all of the above exclusions may not apply to you.

You agree that Business Wire will not be held liable for any improper or incorrect use of the Site or the materials on the Site and assumes no responsibility for any user's activities on the Site or for the inaccuracy of any content on the Site. In no event will Business Wire be liable for any direct, indirect, incidental, special, exemplary or consequential damages, including, without limitation, procurement of substitute goods or services, loss of use, data or profits, or business interruption, arising in any way out of the use of (or inability to use) the Site or the materials on the Site or the inaccuracy of any content on the Site, however caused, under any theory of liability. This disclaimer of liability applies to any damages or injury under any cause of action, including, without limitation, those caused by any failure of performance, error, omission, interruption, deletion, defect, delay in operation or transmission, computer virus or bug, communication line failure, theft, destruction or alteration of or unauthorized access to the Site or materials on the Site. Some jurisdictions do not allow the exclusion of liability for incidental or consequential damages, so some or all of the above exclusions or limitations may not apply to you. [emphasis added]

5. Furthermore, as also previously noted (Evidence Appendix; Exhibit B), the USPTO office itself (trademark # 76173340; since abandoned) reveals that even the Peter Martin Company's own stated first use (and first use in commerce) of HelpWorks Web Edition wasn't until 6/30/2000; again, *after* applicant's 4/12/2000 priority date.
6. Therefore, given the absolute criticality of establishing and confirming unquestioned dates and content for all purported, alleged prior art [which duty, respectfully,

Examiner is charged with; not Applicant]; and the fact that such date and content certainty for the public disclosure of HelpWorks Web Edition is clearly and obviously not present here; it is well settled that arguments relying on such uncertain matter are rendered moot.

Accordingly, all claims should for this reason alone be allowed; with the alleged PMA press release, because it is not a bonafide reference; not qualifying to be included in a/the *Notice of References Cited*.

Non Enabling Subject Matter: All Claims Allowable

7. It is well settled that the scope of the prior art cannot extend beyond its disclosure.

“In determining that quantum of prior art disclosure which is necessary to declare an applicant’s invention ‘not novel’ or ‘anticipated’ within section 102, the stated test is whether a reference contains an ‘enabling disclosure’” In re Hoeksema, 399 F.2d 269, 158 USPQ 596 (CCPA 1968).

The following is a quotation of the appropriate paragraph of 35 U.S.C. 112 which forms one of a number of strong basis’ for the alleged PMA press release being non-enabling subject matter:

“The specification (here, alleged prior art) shall contain a written description of the invention (here, HelpWorks Web Edition), and of the manner and process of making and using it, in such full, clear, and concise and exact terms as to enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to make and use the same” [parentheses added]

8. Thus, even if the alleged PMA press release *were* date and content accurate; which applicant vehemently contends is clearly not the case; it would *still* not be a bona fide reference/ publication/ prior art/ enabling disclosure, for; as is the case with the large majority if not all press releases; the information PMA supplies is clearly and obviously insufficient for the ordinarily skilled artisan in the pertinent art to create/ build and operate the instant invention without undue experimentation.

9. From PMA, what was HelpWorks *Web Edition*'s [not HelpWorks; see below] structure and structural components and features—*specifically*? How were these structural components and features integrated with each other; and within the system as a whole—*specifically*? It's elements, steps, processes--*specifically*? What were its operational and functional features and how did they operate--and operate together—*specifically*?

The alleged PMA press release doesn't say. Indeed, only with considerable and extensive experimentation—over who knows how many months (years?) of time--could the ordinarily skilled artisan even hope to come up with the instant invention from what little (if anything) this alleged press release discloses, teaches--*or even would reasonably suggest*—to the ordinarily skilled artisan of the time.

10. In fact, the case for the non-enablement of PMA is even further more starkly obvious upon a careful, paragraph-by-paragraph examination of PMA. Specifically, note that; of the six paragraphs [numbered 1-6 by Examiner]; only two paragraphs (#4 and 5), *are even addressed and directed to the construction & operation* (such as it is) *of HelpWorks Web Edition*.

Paragraph one states only that HelpWorks, "... *is now Web enabled*" [note that PMA does not indicate; and no other evidence is offered to support; that the Web Edition was constructed and/or operated in the same; or even a similar, or even related, manner to the not web enabled HelpWorks].

Paragraph two; only that HelpWorks Web Edition was (supposedly; no evidence supplied in support of such) launched at some conference; and the Government's migration to e-commerce.

Paragraph three is addressed to; and reveals capability of HelpWorks *only* [not any capability of HelpWorks Web Edition], e.g. "HelpWorks (TM) *is a . . .*"

Clearly and obviously non-enabling paragraphs four and five are directed to; and actually discuss; HelpWorks Web Edition.

(Last) paragraph six? Provides only information concerning Peter Martin Associates; with no information about HelpWorks Web Edition; and not even HelpWorks.

So what we're actually left with then is not even 309 words about the supposed construction and operation of HelpWorks Web Edition; but a clearly and very obviously non-enabling four sentences . . . in two paragraphs . . . totaling a miniscule 117 words actually being directed to Web Edition itself.

11. Given then its clear lack of necessary information, facts, and detail, the alleged PMA press release is clearly and unquestionably non-enabling/non-operable subject matter which does not qualify for—and therefore does not and cannot constitute—a valid reference/ prior art/ enabling disclosure to this art generally; and even further much less so to the instant invention.

The disclosure in an assertedly anticipating reference must provide an enabling disclosure of the desired subject matter; mere naming or description of the subject matter is insufficient, if it cannot be produced without undue experimentation. Elan Pharm., Inc. v. Mayo Found. For Med. Educ. & Research, 346 F.3d 1051, 1054, 68 USPQ2d 1373, 1376 (Fed. Cir. 2003)

Any use of PMA; whether for 35 USC 102 or 103 claims rejections; are, respectfully, improper. Accordingly, all claims should for this reason alone be allowed.

“A reference that is not enabling is not anticipating.”

12. Respectfully, since all of Examiners rejections have for the above reasons been rendered moot, there be no need for applicant to proceed further with this brief. Applicant does accordingly request at this time that all the remaining claims be also allowed; and the patent for which applicant believes has met all the requirements for now be issued.

Please note that; though Applicant may in this brief and/or during these proceedings on occasion inadvertently refer to PMA as “prior art”; or otherwise fail to indicate that such “prior art” is in fact nothing more than supposed or alleged prior art as Applicant fully addresses and responds to Examiners various statements, contentions, etc; Applicant’s well-supported and documented position that alleged PMA is *not* valid prior art [i.e. being date uncertain, non-enabling, etc] at all times remains fully in force and effect in this brief and throughout these proceedings.

13. Furthermore, even supposed PMA isn’t PMA. Specifically, because only paragraphs four and five of the six paragraph (supposed) press release speak about Web Edition, any reference to/use of “PMA” is more accurately “PMA paragraphs 4 & 5.”

Even if the rejections were not already moot for the reasons above, the rejections would *still* be overcome, traversed, and/or rendered moot; as follows:

USC 102/103 Claim Rejections Overcome: All Claims Allowable

14. As they contain no accompanying explanations to the rejections as is required/ customary with 103 rejections (i.e. Examiner stating, “...*PMA fails to expressly disclose...*” followed by “*However...*”), applicant believes that Examiner has, apparently, inadvertently continued to designate a number of claims as being subject to alleged 103 rejections as opposed to the intended (?) alleged 102 rejections; specifically: #13, p.5 (claims 184, 206, 228, 250); #19, p.6 (claims 191, 213, 235, 257); #20, p.6 (claims 192, 214, 236, 258); #21, p.6-7 (claims 193, 215, 237, 259); #22, p.7 (claims 194, 216, 238, 260); #23, p.7 (claims 195, 217, 239, 261); #24, p.7 (claims 196, 218, 240, 262); #27, p.8 (claims 198, 220, 242, 264); and #28, p.8 (claims 199, 221, 243, 265). Applicant requests that should this not be the case, that applicant be notified of, and be allowed to respond to, such notification.

15. Furthermore; Re #18, p.6 of OA; clarification is needed with respect to the position(s?) Examiner is taking regarding claims 190, 212, 234, and 256; as it is unclear whether they were rejected based on USC 102, 103, (or the utilization of) Official Notice, some combination thereof, or ?

#18's initially worded like a 102 rejection, "...*PMA discloses*..." ; but then goes on to reference, "*PMA Commerce*" ; and that Applicant should see the rejection of claims 189, 211, 233, and 255 (even though these claims were rejected on a 103 basis). And was Official Notice taken on these claims as it was on claims 189, 211, 233, and 255?

For the sake of expediency, Applicant will; in due order following; explain why claims 190, 212, 234, and 256 are themselves also all allowable; regardless of 102, 103, and/or Official Notice. For the record, Applicant requests that Examiner nevertheless explain and make of record just what Examiner's position was/is regarding these four claims; with Applicant being granted the commensurate opportunity to address any contention(s)/matter(s) concerning these four claims which Applicant has not had the opportunity to address; or address fully; in this brief.

16. Regardless of whether or not Examiners intention was to attempt to use USC 102, or 103, as the basis for rejections of those claims not yet being indicated as being allowed and allowable, applicant will now demonstrate that each and every such remaining independent and dependent claim is also neither anticipated nor obvious by alleged PMA. Authorities that form one or more additional basis' for the withdrawal/traversal of alleged anticipation and/or obviousness include but are not limited to:

"A claim is anticipated only if each and every element as set forth in the claim is found, either expressly or inherently described, in a single prior art reference." Verdegall Bros. v. Union Oil Co. of California, 814 F.2d 628, 631, 2 USPQ2d 1051, 1053 (Fed Cir. 1987)

"In rejecting claims under 35 U.S.C. § 103(a), the examiner bears the initial burden of establishing a prima facie case of obviousness." See *In re Oetiker*, 977 F.2d 1443, 1445 (Fed. Cir. 1992); see also *In re Piasecki*, 745 F.2d 1468, 1472 (Fed. Cir. 1984).

“In rejecting claims under 35 U.S.C. § 103, it is incumbent upon the Examiner to establish a factual basis to support the legal conclusion of obviousness.” See In re Fine, 837 F.2d 1071, 1073 (Fed. Cir. 1988).

The Examiner’s articulated reasoning in the rejection must possess a rational underpinning to support the legal conclusion of obviousness. *In re Kahn*, 441 F.3d 977, 988 (Fed. Cir. 2006).

Non-Human Benefit Seekers—All Claims Directed to Such Allowable

17. The alleged PMA (like HelpWorks) was only for use by and for humans; not for businesses, governments, educational institutions, or non-profits. As this is clearly unique, non-obvious, unsuggested, and patentably distinct over the alleged PMA, for this reason alone the remaining/ appealed “non-human” claims 225, 228, 232-247, 250, 254 and 268 should, respectfully, be allowed.

The differences between living, breathing, guaranteed-to-someday-die human beings and inanimate, can exist forever businesses, governments, educational institutions, and non-profits are clearly more patentably distinct than the differences between a human being and a fellow living, breathing, guaranteed-to-someday-die dog, cat, horse . . . and all other living creatures.

18. Accordingly, all of the instant invention’s claims directed to non-human benefit matching; being far more patentably distinct from human benefit matching than those between living creatures [for which species-specific drugs, etc are well-settled as being allowable]; are themselves also allowable.

19. Furthermore, as is the case with all the instant invention’s dependent claims, all the non-human dependent claims do themselves incorporate all of the limitations of their respective non-human independent claims and add additional limitations and subject matter and thus are a fortiori patentable. In addition, the dependent claims are themselves each also independently patentable, as will be readily appreciated further on within this brief.

20. Re: OA p.3-4, #6-7 and p.4-5, #10-12: Independent Claims **271-272** and **181, 203, 225, and 247** are neither anticipated nor rendered obvious by the alleged PMA for at least the following reasons:

- A. PMA discloses and/or suggests no more than human benefit-matching.
- B. PMA discloses and/or suggests no more than benefit matching services provided by and available from agencies.
- C. PMA discloses and/or suggests no more than benefits available from and provided by federal, state, and/or local governments. [provisional]
- D. PMA discloses and/or suggests no more than the required use of privacy-invasive, loss of anonymity, personal identification (i.e. name, social security number, drivers license/number) of the benefit seekers. [provisional]

21. Note that; given the extreme paucity of useful, applicable information in alleged PMA; “C” and “D” above are stated as distinguishing features over alleged PMA on a *provisional basis only*; meaning that they would apply only were it to be legally demonstrated; either in these proceedings or at some future time; that HelpWorks and HelpWorks Web Edition both had these specific and particular two characteristics in common; at some date prior to the priority date of the instant invention.

Inventor’s modification of this status for “C” and “D” from his previous position resulted from a closer, paragraph-by-paragraph, phrase-by-phrase, and word-by-word examination of this supposed press release during the preparation of a previous brief; where it’s now clear that no evidence in the alleged prior art PMA discloses, teaches, nor even reasonably suggests that HelpWorks *Web Edition* had the characteristics contained in “C” and “D.”

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, claims 225 and 247 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

22. Finally; note that in #12 p.5; Examiner has stated, correctly, that; per paragraph #3 of alleged PMA; that HelpWorks *can be configured to evaluate any or all benefits and programs required* However, it is the construction and operation of HelpWorks Web Edition; and *not* HelpWorks; which is at issue here.

Accordingly, any statement(s) or inferences that the HelpWorks Web Edition way of screening [but how?] (referenced in paragraph four; *not* three; of alleged PMA) was configurable at all; much less configurable to evaluate *any or all benefits and or programs required*; is, respectfully, mere unpermitted supposition and speculation.

Therefore; because there is no basis to “duct tape” any construction or operational features or capabilities of HelpWorks on to HelpWorks Web Edition; even for this reason only; independent claims 271, 272, 181, 203, 225, and 247 should be allowed.

23. Re: OA p.5, #13 (claims 184, 206, 228, 250): Nothing in PMA teaches, discloses, or suggests such useful and valuable storage of part or all of system users data (i.e. in order to save time having to complete a new application for each benefit check, for automated notification of change/s in benefits, etc.) Neither HelpWorks nor HelpWorks Web Edition (WE) offered such capabilities. Storing such “benefit-matchable” data was not at all inherent to internet operations, and there’s not even a suggestion in alleged PMA that Expert Eligibility Server had such an obviously novel and valuable capability.

While databases and their use and administration were of course known to the arts generally, note that the architecture for and procedures to implement such capability/ies was not conventional in the breakthrough benefits-matching instant invention.

Furthermore, claims 228 and 250 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

24. Re: OA p.5, #14-15. Claims 188, 210, 232, and 254 are neither anticipated nor rendered obvious by the alleged PMA for at least the following reasons:

- A. Since, as per #13 above, alleged PMA neither discloses, teaches, nor suggests the *storage* of users data, a fortiori it cannot disclose, teach, or suggest the requirement that such users *must* update their (stored) data as a condition of continued system use.
- B. These claims absolutely *require* data updating as a condition of use; at best, alleged PMA teaches and/or suggests merely that users *could* or *should* update. This is a critical, valuable, and patentably distinct difference and improvement.

Furthermore, even if such required data updating *were* known to the art generally, note that the architecture for and procedures to implement this capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 232 and 254 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

26. Re: OA p.5-6, #16-17. Claims 189, 211, 233, and 255 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests income/value payment/remuneration based on at least the partial value of—or some part to all--of at least one or more of the benefits themselves. Charging for general services provided to users (but not benefit seekers) at the time of the invention consisted merely of conventional means, i.e., by subscription, per-use, etc.

Because this unique capability allows for the benefits themselves to act, as least in part, as the financial support mechanism for the instant invention, financial support from the benefit seekers and/or or others can be reduced or eliminated. Neither HelpWorks nor HelpWorks Web Edition systems offered, taught, disclosed, or suggested such an obviously useful and clearly valuable capability.

27. Accordingly, Applicant respectfully contests the Examiner's taking of Official Notice; and requests that; per at least 37 CFR 1.104(d)(2); Examiner provide and make of record the specific factual findings, explicit basis for a clear and unmistakable technical line of reasoning, concrete evidence, and authority within an affidavit or declaration; that Examiner believes exists to support Examiner's position that each of these clearly creative and unconventional, unique, and valuable *from the benefits themselves* payment/income generation options were a well-known form of business at the time the invention was made.

Official notice unsupported by documentary evidence should only be taken by the examiner where the facts asserted to be well-known, or to be common knowledge in the art are capable of instant and unquestionable demonstration as being well-known. As noted by the court in *In re Ahlert*, 424 F.2d 1088, 1091, 165 USPQ 418, 420 (CCPA 1970), the notice of facts beyond the record which may be taken by the examiner must be "*capable of such instant and unquestionable demonstration as to defy dispute*" (citing *In re Knapp Monarch Co.*, 296 F.2d 230, 132 USPQ 6 (CCPA 1961)). MPEP 2144.03(A)

If Applicant Challenges a Factual Assertion as Not Properly Officially Noticed [as here] or [here; and] Not Properly Based Upon Common Knowledge [as here], the Examiner Must Support the Finding With Adequate Evidence MPEP 2144.03(A) [boxes added]

The Office's attempts at Official Notice are therefore improper and traversed. Consequently, there are evidentiary gaps in the rejections of claims 189, 211, 233, and 255 that are fatal to a *prima facie* case of obviousness.

The obviousness rejections of claims 189, 211, 233, and 255 cannot be sustained at least because (i) the Examiner has not established a factual basis to support the legal conclusion of obviousness (*see* Fine 837 F.2d at 1073), and (ii) the Examiner's articulated reasoning does not support a legal conclusion of obviousness. *KSR Int's Co. v. Teleflex.*, 550 U.S. 398, 418 (2007). *See also In re Fine*, 837 F.2d 1071, 1076 (Fed. Cir. 1988) (If an independent claim is nonobvious under 35 U.S.C. § 103, then any claim dependent therefrom is nonobvious). Furthermore, because the dependent claims each add additional subject matter they are also independently patentable.

Accordingly, the rejections of these claims cannot be sustained.

Furthermore, even if such payment/income generation options *had* been known to the arts generally, note that the architecture for and procedures to implement this capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 233 and 255 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

28. Re: OA p.6, #18. Claims 190, 212, 234, and 256 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests the benefit providers themselves paying to have their benefits made available to the benefit seekers. Having benefit providers compensate system operator—whether paid by such providers directly and/or through third parties—flips convention on its head. Such an approach will make such benefit-providing services more easily and affordably accessed by the benefit seekers.

In addition; if Examiner intended to take Official Notice regarding these four claims; which is unclear to Applicant from the comments (please also see 1.5 above) in this most recent OA; Applicant respectfully contests the Examiner's taking of Official Notice; and

requests that; per at least 37 CFR 1.104(d)(2); Examiner provide and make of record the specific factual findings, explicit basis for a clear and unmistakable technical line of reasoning, concrete evidence, and authority within an affidavit or declaration; that Examiner believes exists to support Examiner's position that each of these clearly creative and unconventional, unique, and valuable *where the benefit providers themselves pay to present their benefits to the benefit seekers* payment/ income generation options were a well-known form of business at the time the invention was made. See *In re Ahlert*, supra; *In re Knapp Monarch Co.*, supra; MPEP 2144.03(A), supra; MPEP 2144.03(A), supra.

Furthermore, even if such payment/income options *had* been known to the arts generally, note that the architecture for and procedures to implement this capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 234 and 256 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

29. Re: OA p.6, #19. Claims 191, 213, 235, and 257 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests the useful and valuable, "*keep the benefits and benefits information as current as possible*" as disclosed in the instant invention. Keeping such data as current as possible in this manner is entirely foreign to alleged PMA. While "user configurable" capability was known to the arts in general-use sense, note that the architecture for and procedures to implement this capability is not conventional in the breakthrough benefits-matching instant invention.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Finally, note that claims 235 and 257 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

30. Re: OA p.6, #20. Claims 192, 214, 236, and 258 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests the completely counter-intuitive, clearly unconventional revealing/providing of benefit/ benefit provider information which *does not* correspond to benefit seekers data; nor the providing of application forms, contact information, or maps. The fact that the HelpWorks system (which; again; is *not* HelpWorks WE) is meant to be a screening and referral tool *does not* also mean that the applications forms, contact information, and a map/ directions are *automatically* generated in/via the message (and *directly* delivered to the benefit seeker *without* the involvement or assistance of another, i.e. a social worker printing off and/or handing forms to the benefit seeker); as is required by these four claims. Alleged PMA says or suggests nothing about these novel, valuable capabilities.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, Examiner has correctly stated that the HelpWorks system is meant to be a screening and *referral* tool. However:

First, because it is HelpWorks *Web Edition* which is at issue here and not HelpWorks; because Examiner has rejected these claims based on a (supposed) prior art capability not in evidence; even for this reason alone claims 192, 214, 236, and 258 should be allowed.

Second, even if Examiner intended to say HelpWorks Web Edition instead of HelpWorks, there is nothing in alleged PMA to indicate or even suggest; *even if it were* a screening and referral system generally (which Applicant disputes), that Web Edition

provided the obviously novel, valuable, and useful capabilities of claims 192, 214, 236, and 258. Nothing.

Finally, note that claims 236 and 258 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

31. Re: OA p.6-7, #21. Claims 193, 215, 237, and 259 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests the clearly useful and valuable capability of the benefit seekers and benefit providers being able—once the benefits which correspond to the seekers data have been identified—to connect and interact *directly* via the system (e.g. over the Internet); without the involvement of non-benefits-providing intermediaries.

HelpWorks; requiring such intermediaries, is a *referral* tool only in the sense that the benefit seeker is *human* referred to benefit providers. And while HelpWorks WE may not require such human involvement, alleged PMA also neither says/teaches--nor even suggests—*directly via the system* connecting seekers with providers, nor enabling interaction between seekers and providers, nor completing application forms, nor assisting in the completion of the application forms, nor transmitting the benefit approvals, nor transmitting approval acceptances, nor receiving benefits, nor utilizing benefits.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, Examiner has correctly stated that the HelpWorks system is meant to be a screening and *referral* tool. However:

First, because it is HelpWorks *Web Edition* which is at issue here and not HelpWorks; because Examiner has rejected these claims based on a capability not in evidence; even for this reason alone claims 193, 215, 237, and 259 should be allowed.

Second, even if Examiner intended to say HelpWorks Web Edition instead of HelpWorks, there is nothing in alleged PMA to indicate or even suggest; *even if it were* a screening and referral system generally (which Applicant disputes), that Web Edition provided the obviously novel, valuable, and useful capabilities of claims 193, 215, 237, and 259. Nothing.

Finally, note that claims 237 and 259 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

32. Re: OA p.7, #22. Claims 194, 216, 238, and 260 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests the clearly useful and valuable capability of real or near real time benefit matching. No such capability/ies are disclosed in alleged PMA. The fact that HelpWorks WE was web based does not automatically insure that benefit results were instantly (or even nearly so) available upon the submission of the seekers data. They could have been delivered (e.g. e-mailed) an hour, day, or more after data submission. Who knows? Alleged PMA doesn't say, or even suggest.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 238 and 260 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

33. Re: OA p.7, #23. Claims 195, 217, 239, and 261 are neither anticipated nor rendered obvious by alleged PMA at least because all these four claims include the limitation, “*via said system.*” With neither HelpWorks nor HelpWorks WE are caseworkers able to have the seekers benefit information shared with them *via the system* (e.g. via the Internet). This capability enables, for example, a benefit seeker to share the benefit match results with a relative in a different state or country (e.g. have the results concurrently displayed on their own computer or cell phone/PDA screen). There be no disclosure, teaching, nor suggestion nor support for such a capability in alleged PMA.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, Applicant finds no Examiner stated, “(*Provider user results in caseworker example*)” in alleged PMA to support Examiner’s contention. Accordingly, there being no support for this position, even for this reason alone claims 195, 217, 239, and 261 should be allowed.

Finally, note that claims 239 and 261 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

34. Re: OA p.7, #24. Claims 196, 218, 240, and 262 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests such capability/ies. Additionally, the useful and valuable disclosing to entities of benefits for which they *may not or do not* qualify for; running as it does completely counter to the purpose for which benefit matching systems exist in the first place, were obviously not known to the arts.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 240 and 262 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

Finally, as its meaning and intent is unclear, Applicant requests that; should it be relevant or otherwise advisable to do so; that Examiner explain the intended purpose of the notation, “(Pg.1)” at the end of #24 on p.7; further permitting Applicant to properly address such as may be necessary and/or desirable.

35. Re: OA p.7, #25-26. Claims 197, 219, 241, and 263 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests such a *counter-intuitive*, yet clearly useful and valuable *benefits you wouldn't normally be made aware of* capability. The disclosing of benefits without regards to at least some of seekers data clearly runs counter to the purpose and operation of benefit matching systems; including HelpWorks and HelpWorks WE.

Stating that, “...*it would have been obvious to...all users.*”; and especially so without the requisite factual basis and support; is merely unsupported conjecture and supposition. There is no disclosure, teaching, or suggestion in alleged PMA for the use of a *general baseline* or some sort of *basic results available to all users.*

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore; note that in #26 p.7; Examiner has stated, correctly, that; per paragraph #3 of alleged PMA; that HelpWorks *can be configured to evaluate any or all benefits and programs required* . . . However, it is the construction and operation of HelpWorks Web Edition; and *not* HelpWorks; which is at issue here.

Accordingly, any statement(s) or inferences that the HelpWorks Web Edition way of screening [but how?] (referenced in paragraph four; *not* three; of alleged PMA) was configurable at all; much less configurable to evaluate *any or all benefits and or programs required*; is, respectfully, mere unpermitted supposition and speculation.

Therefore; because there is no basis to “duct tape” any construction or operational features or capabilities of HelpWorks on to HelpWorks Web Editon; and specifically the above capability; even for this reason alone; claims 197, 219, 241, and 263 should be allowed.

Finally, note that claims 241 and 263 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

36. Re: OA p.8, #27. Claims 198, 220, 242, and 264 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests the clearly useful and valuable benefit provider *direct submission into system* capability. Neither HelpWorks nor HelpWorks WE offered or suggested such a capability. As far as was known by the instant inventor at the time of invention (or at time of the drawing of this brief), prior art benefit matching systems relied instead on the time-consuming human gathering of benefit information from the benefit providers; which was thereafter then human entered into the benefit matching systems. These four claims provide obviously huge time, labor, and money savings advantages over any and all previous benefit matching systems known to the instant inventor.

Despite it's use by Examiner, there is/are no "*User configurable*" statement(s) concerning HelpWorks Web Edition in supposed PMA. The closest such is the use of the word "*configured*" in paragraph three. But; as explained previously; paragraph three talks *only* about HelpWorks; *not* about Web Edition, which is what's at issue here.

Accordingly, any statement(s) or inferences that HelpWorks Web Edition was "*User configurable*" at all; much less configurable *by the benefit providers themselves* (something not even HelpWorks could apparently do); is, respectfully, mere unpermitted supposition and speculation.

Therefore; because there is no basis to "duct tape" any construction or operational features or capabilities of HelpWorks on to HelpWorks Web Edition; and specifically no basis for the ability for the benefit providers themselves to submit benefit information or benefits directly into the system; even for this reason alone; claims 198, 220, 242, and 264 should be allowed.

Furthermore, these four claims also contain "...*and or said benefits...*"; which is an even further useful and valuable capability; and another one which supposed PMA neither discloses, teaches, nor suggests. Actually delivering the benefits themselves (i.e. monetary transfers, certificates, coupons, vouchers, etc) *directly* through the system (e.g. via the Internet) to qualified benefit seekers? Unanticipated and nonobvious indeed!

Still furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Finally, note that claims 242 and 264 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

37. Re: OA p.8, #28. Claims 199, 221, 243, and 265 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests this clearly useful and valuable *third party submitter* capability. Neither HelpWorks nor HelpWorks WE offered or suggested such capability. The ability of benefit providers to have others handle their benefit submissions (and administration) for them is a clear advantage to those providers who would otherwise find it difficult to submit them themselves (e.g. with their own staff/employees). Additionally, benefit submission specialists may be able to provide additional value add services to the benefit provider industry.

In addition, as the Examiner-relied upon “*PMA configured presets—government benefits*” can *at best only* refer to the structure/operation of HelpWorks and *not Web Edition* (as “*configured*” and “*government*” are found only in “directed-to-HelpWorks-only” paragraph three); respectfully, Examiner’s misdirected statement can not form a legal basis for the rejection of these claims. Accordingly, even for this reason alone, claims 199, 221, 243, and 265 should be allowed.

Furthermore, even if such a capability *had* been known to the arts generally, note that the architecture for and procedures to implement such a capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 243 and 265 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

38. Re: OA p.8, #29-30. Claims 200, 222, 244, and 266 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests this clearly useful and valuable *variable benefits* capability. Neither version of HelpWorks offered such capability. Benefit systems of the time required the *completion* of an application form in order to determine benefits qualification; incomplete

applications—lacking *all* the necessary information/data--could not be entered; or if able to be entered, would not produce any results.

While applicant acknowledges that many database correlation systems of the time did supply variable data output as the input varied, it's important to note that; as far as the instant inventor knew or knows; such capability was *not* used in benefit matching systems of the time (i.e. HelpWorks); as it would have been illogical (in their viewpoint, anyway) to allow benefit seekers to submit what the system (and benefit) providers considered incomplete applications.

Yet; as applicant has pointed out; though counter-intuitive to the field at the time; there's actually great *unanticipated* and *nonobvious* value in being able to discover *at least some of* the benefits one qualifies for, even with what the field at the time considered to be useless "incomplete" benefit seeker data submissions; as far as the instant inventor knew or knows.

Furthermore, even if such a capability *had* been known to the arts generally, note that the architecture for and procedures to implement such a capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 244 and 266 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

39. Re: OA p.8, #31-32. Claims 201, 223, 245, and 267 are neither anticipated nor rendered obvious by alleged PMA at least because it neither discloses, teaches, nor suggests this clearly useful and valuable *phantom data* capability. Inputting inaccurate information runs completely counter to the whole purpose of benefit matching systems (of the time); which of course required completely accurate information in order to deliver accurate benefit information. Yet allowing the use of phantom data, as applicant explains in his specification, actually provides some very useful and worthwhile

information to the seeker. Examiner's stated "...*the best-fit option...*" cannot logically be anything *but* the actual *factual* data of a benefit seeker because *only* by the use of completely *factual* information will a seeker be able to discover any and all the benefits applicable to seeker. *That* is the best-fit option.

These four claims are not for the determination of best-fit options at all; but instead allow seekers to discover what benefits they could qualify for *if* at least some of their demographic, etc traits and characteristics were *different* than what they *really* are; i.e., if they earned more—or less—income, lived in a different city, were a different marital status, etc. There's clearly great *unanticipated* and *nonobvious* value and usefulness with this counter-intuitive capability; which capability is different (patentably different) than the capability of claims 200, 222, 244, and 266.

Furthermore, even if such a capability *had* been known to the arts generally, note that the architecture for and procedures to implement such a capability would *still* not be conventional in the breakthrough benefits-matching instant invention. Still furthermore, note that claims 245 and 267 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

40. Re: OA p.8-9, #33-35. Claims 202, 224, 246, and 268 are neither anticipated nor rendered obvious by alleged PMA at least because the architecture for and procedures to implement such a capability are not conventional in the breakthrough benefits-matching instant invention.

As per the specification, "*Identification (ID) information*" refers to true, unquestioned, personally-identifying information such as actual name, social security number, street address, drivers license number, etc; *not* an easily spoofed and/or often/usually unconfirmable e-mail address (and in any case; who knows who sent any particular e-mail from a given e-mail address?) or web connection (identifies the computer; not the computer user/benefit seeker).

In one non-limiting embodiment, such a capability more easily allows those entities providing products and services legally restricted to being received by, i.e. people of a minimum age (alcohol, tobacco products, etc); to insure that the benefit seekers meet such legal requirements before the benefit(s) are supplied (or even offered) to them. Examiner's examples; e-mail, we-connection ID (#34), user ID (#35); are obviously insufficient to meet such legal verification(s).

In another non-limiting, non-human embodiment, such a capability would; for example; allow a small Idaho-based business-to-business firm which only sells and services its products in Idaho, to limit its benefit offer (i.e. a free trial, free 30 days of maintenance, free installation) to companies willing to provide a verifiable, confirmable address within the state of Idaho; where they don't want companies outside Idaho even knowing about their benefit offer.

Furthermore, note that claims 246 and 268 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

***The Proposed Modification Cannot Render the Prior Art
Unsatisfactory for Its Intended Purpose (MPEP 2143)***

*If proposed modification would render the prior art invention being
modified unsatisfactory for its intended purpose, then there is no
suggestion or motivation to make the proposed modification. In re Gordon,
733 F.2d 900, 221 USPQ 1125 (Fed. Cir. 1984)*

41. As demonstrated previously in this brief, alleged PMA is clearly non-enabling. That said, what we do know about HelpWorks Web Edition; were PMA valid prior art; is that it was no more than benefit matching for humans; and then only those benefits *an agency* wished to provide.

Yet the instant invention; and particularly so in the case of the all-entity claims as well as the non-human claims; was not so constricted or limited. Specifically, because any attempt to modify Web Edition in such a way to enable it to match and supply benefits to (in particular) non-human or all (all entities) benefit seekers would render it unsatisfactory for its intended purpose of matching *agency sourced* benefits to humans, then there is no suggestion or motivation to make the proposed modification.

Accordingly; even for this reason alone; all claims should be allowed.

***The Proposed Modification Cannot Change the
Principle of Operation of a Reference (MPEP 2143)***

If the proposed modification or combination of the prior art would change the principle of operation of the prior art invention being modified, then the teachings of the references are not sufficient to render the claims prima facie obvious. In re Ratti, 270 F.2d 810, 123 USPQ 349 (CCPA 1959)

42. As demonstrated previously in this brief, alleged PMA is clearly non-enabling. That said, what we would know about HelpWorks Web Edition were PMA valid prior art, is that it was no more than benefit matching for humans; and then only those benefits *an agency* wished to provide.

Yet the instant invention; and particularly so in the case of the all-entity claims as well as the non-human claims; was not so constricted or limited. Specifically, because HelpWorks Web Edition would require a substantial reconstruction and redesign even of the few non-enabling elements shown in the alleged reference; as well as a change in the basic principle under which Web Edition was apparently designed to operate; in order to match and supply benefits to (in particular) non-human or all (all entities) benefit seekers; the principle of operation would of necessity have to be changed.

The teachings of the reference are therefore not sufficient to render the claims prima facie obvious. Accordingly; even for this reason alone; all the claims should be allowed.

Response to Response to Arguments

43. Re OA #45 p.1 ~~11~~1. Respectfully:

A) Examiner has misconstrued Applicant's position concerning what PMA is. Specifically as per Applicant's #3 of this brief; Applicant argues; not that PMA is not valid prior art because an *additional* press release was issued regarding similar subject matter on 4/24/2001, but, that HelpWorks Web Edition was *brand new*—which is completely illogical—*on two different dates; and over 18 months apart*.

While Applicant again acknowledges that there is a difference and count in the wording, that is not the primary point at hand here; which is how—or why—would any company; let alone an obviously reputable one (i.e. held government contracts) like Peter Martin; announce to the public; and especially so to their marketplace *including critically important existing and potential future clients*; that they launched an important new product/service twice . . . *1½ years apart?*

The Louisiana Purchase was not consummated in 1803 and in 1805.

Man did not land on the moon for the first time in 1969 and in 1971.

HelpWorks Web Edition was not launched in 1999 and in 2001.

B) Furthermore; respectfully; Examiner has misconstrued which party is responsible for proving what, when. Specifically, because by law, submitted inventions carry the presumption of validity/patentability, it is the *Examiners* who are charged with proving/demonstrating that a claimed invention *is not* entitled to issuance/allowance; should they believe that such is the case.

Applicant does not have to prove that such asserted subject matter (here; supposed PMA) is *not* valid art [i.e. date certain, content enabling]; (anymore than someone

accused in a trial has to prove they are innocent). To the contrary, Examiner has to prove that it is.

“whether information is printed, handwritten, or on microfilm or magnetic disk or tape, etc., the individual [here; Examiner] who wishes to characterize the information as a printed publication...should produce sufficient evidence of its dissemination or that it has been otherwise available and accessible to persons concerned with the art to which the document relates...” Wyer, 655 F.2d at 227, 210 USPQ at 795, Amazon.com v. Barnesandnoble.com, 73 F. Supp. 2d 1228, 53 USPQ 2d 1115, 1119 (W.D. Wash. 1999)[box added]

Plus this from MPEP 2142:

“The examiner bears the initial burden of factually supporting any prima facie conclusion of obviousness.”

Given then the clear date uncertainty of any alleged “PMA,” the argument made by the Examiner regarding the validity of PMA holds no proof that some supposed “9/28/99” version is proper prior art is itself merely a speculative comment.

C) For the reasons stated earlier in this brief, it’s clear that; contrary to Examiners contentions otherwise; that the supposed “9/28/99” PMA:

1. Cannot be treated as some kind of “original,” date accurate press release.
2. Even if it were date accurate, it in no way contains sufficient subject matter (again; only 117 *Web Edition* applicable words) which would enable one of ordinary skill in the art at the time the invention was made to recreate the business method/system without undue experimentation.

“Art found during the search must qualify as ‘prior art’ as defined by 35 U.S.C. 102 before it can be used to reject a claimed invention. This involves determination of when art became public, who was the source of the art (e.g., the inventor or another party), and whether the art satisfies the enablement provision of 35 U.S.C. 112, first paragraph.” [emphasis added]
<http://www.uspto.gov/web/menu/busmethp/busmeth103rej.htm>

***Mere Statement that the Claimed Invention is Within the
Capabilities of One of Ordinary Skill in the Art is Not Sufficient
by Itself to Establish Prima Facie Obviousness***

D) Finally; the last sentence in #45 states, *"The Examiner also believes that the original press release (9/28/99) contained sufficient subject matter, which would enable one of ordinary skill in the art at the time the invention was made to create the business method/system."*

Yet, because this lacks any articulated reasoning with some rational underpinning to support a legal conclusion of obviousness, it is; respectfully; merely a one-sentence conclusory statement.

[R]ejections on obviousness cannot be sustained by mere conclusory statements; instead, there must be some articulated reasoning with some rational underpinning to support the legal conclusion of obviousness." KSR, 550 U.S. at ___, 82 USPQ2d at 1396 quoting In re Kahn, 441 F.3d 977, 988, 78 USPQ2d 1329, 1336 (Fed. Cir. 2006). MPEP 2143.01

Accordingly; because there is no basis for a finding of obviousness; even for this reason alone all the claims should be allowed.

44. Re: OA #46, p.11. First, respectfully, Examiner has here misconstrued Applicant's position. Specifically; as we are now and have most recently been dealing with just one (supposed) reference (PMA); Applicant has in fact made *no* arguments that, *"...the references [note plural] fail to show certain features of applicant's invention, ..."*

Accordingly; as there are no *"references"* [plural] of record, and therefore no basis for the rejection of claims 270-272; even for this reason alone claims 270-272 should be allowed.

Furthermore, it is well settled that to ascertain the meaning of the claims, one may look to the written description, the drawings, and the prosecution history. See, e.g., *DeMarini Sports, Inc. v. Worth, Inc.*, 239 F.3d 1314, 1324 [57 USPQ2d 1889] (Fed. Cir. 2001).

Here; given the written description and prosecution history of the instant invention, it's clear that the valuable, useful, novel, and unobvious *up to all-entities, up to all benefit providers* benefit-matching teaching of these three claims are easily patentable over the alleged prior art. Benefit matching without limits is clearly patentably distinct over the limited, constricted HelpWorks Web Edition; and starkly so over the virtually non-existent details of it as contained in alleged PMA.

Manifestly then; despite Examiner's untenable contention to the contrary; no limitations from the specification are being read into these claims. They don't have to be. Therefore, because of its antithetical impact, the Examiner's interpretation does not comply with the requirement that claim interpretation must be reasonable and consistent with the specification. See *in re Hyatt*, 211 F.3d 1367, 1372, 54 USPQ2d 1664, 1667 (Fed. Cir. 2000).

Accordingly, even for this reason alone claims 270-272 should be allowed.

45. Re: OA #47-48, p.11; regarding claims 181, 203, 225, and 247. In order to avoid repetition/duplication, please see again at least # 3-6, p.4-6; # 7-13, p.6-9; and # 20-22, p.12-13; and # 55, p.37 (to follow) of this Brief.

Furthermore, claims 225 and 247 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

46. Re OA #49, p.11; even if PMA were valid prior art, which Applicant continues to vehemently contend is clearly not the case:

- A) Supposed PMA does not in fact disclose a method/ system of offering benefits from a wide variety of providers to a wide variety of “consumers” ; but merely a method/ system for matching humans with benefits from government agencies.
- B) Furthermore, Examiner’s attempt to here define and/or expand the meaning of “consumers” as/to including businesses, governments, educational institutions, and non-profits is without support or foundation. As is seen in other arts (e.g. pharmaceuticals, biologicals), it is well settled that even the differences between different species of living creatures are easily patentably distinct.

Indeed, the differences between living, breathing, *guaranteed-to-die* human beings and inanimate businesses, governments, educational institutions, and non-profits are clearly more patentably distinct than the differences between a human being and a fellow living, breathing, *guaranteed-to-die* dog, cat, horse . . . and all other living creatures.

Accordingly, Examiner’s belief that the language used by the supposed prior art for method/system users is equivalent to the stated users indicated by Applicant is, respectfully, clearly unfounded.

47. Re OA #50, p.12. Respectfully; to no less than the degree required of unrepresented, pro se Applicants (e.g. SS 41.37 of the Patent Rules) such as himself, Applicant has in no fewer communications with Examiner than this brief, addressed this request. Further; for no fewer than each of the claims not yet allowed; Applicant has in this brief carefully,

thoughtfully and specifically indicated the exact claim and subject matter which the supposed cited prior art fails to teach or reasonably suggest.

48. Re OA #51-52, p.12. Respectfully, Applicant disagrees with the characterization by Examiner that the supposed prior art fails to teach “several” elements taught by the dependent claims. In fact; as is clear from Applicant’s above *dependent claim-by-dependent claim* explanation; the supposed prior art does not fail to teach merely *several* elements taught by the dependent claims, but in fact fails to teach (or even suggest) all *the elements* taught by the dependent claims.

Also (Re #52); as Applicant did in his 4/17/2007 Response to the 1/18/2007 Non-Final office action; each 103(a) rejection was previously acknowledged, addressed, and overcome. Finally, as previously noted and detailed with authorities above, Applicant contests and disputes the taking of Official Notice.

49. The following two paragraphs are a quotation from the appropriate portion of the USPTO website which (if and where applicable; *also*) forms a basis for the rejection of a prima facie case of obviousness:

“To establish a prima facie case of obviousness, three basic criteria must be met. First, there must be some suggestion or motivation, either in the references themselves or in the knowledge generally available to one of ordinary skill in the art, to modify the reference or to combine reference teachings. Second, there must be a reasonable expectation of success. Finally, the prior art reference (or references when combined) must teach or suggest all the claim limitations.”

“The initial burden is on the examiner to provide some suggestion of the desirability of doing what the applicant has done. To support the conclusion that the claimed invention is directed to obvious subject matter, either the references must expressly or impliedly suggest the claimed invention or the examiner must present a convincing line of reasoning as to why the artisan would have found the claimed invention to have been obvious in light of the teachings of the references. Both the suggestion to make the claimed combination and the reasonable expectation of success must be founded in the prior art and not in applicant’s disclosure.”

<http://www.uspto.gov/web/menu/busmethp/busmeth103rej.htm>

Furthermore:

The key to supporting any rejection under 35 U.S.C. 103 is the clear articulation of the reason(s) why the claimed invention would have been obvious. The Supreme Court in KSR noted that the analysis supporting a rejection under 35 U.S.C. 103 should be made explicit. MPEP 2143: Basic Requirements of a Prima Facie Case of Obviousness

50. As a critical safeguard against hindsight analysis and rote application of the legal test for obviousness, Examiner has failed to explain; for any of the claims; the specific understanding or principle within the knowledge of an ordinary-skilled person that would motivate one with no knowledge of the instant invention to make the suggested modifications to the alleged reference.

The reviewing court has repeatedly cautioned against employing hindsight by using the appellant's disclosure as a blueprint to reconstruct the claimed invention from the isolated teachings of the [here; alleged] prior art. See, e.g. Grain Processing Corp. v. American Maize-Prods. Co., 840 F.2d 902, 907, 5 USPQ2d 1788, 1792 (Fed Cir. 1988). [box added]

51. Examiner has furthermore not set forth any basis for a reasonable expectation of success; for any of the claims; of a modification of the alleged reference; which reasonable expectation must be found in the alleged prior art reference. See *Brown & Williamson Tobacco Corp. v. Philip Morris Inc.* 229 F.3d 1120, 56 USPQ2d 1456, (Fed. Cir. 2000) and *In re O'Farrell*, 853 F.2d 894, 903-04, 7 USPQ2d 1673, 1680-81 (Fed. Cir. 1988).

52. Still furthermore; as can be readily appreciated by the forgoing claim-by-claim treatment and analysis by Applicant; the alleged prior art reference neither teaches nor suggests the required all the claim limitations of any of the claims of the instant invention.

53. Accordingly and respectfully, as Examiner has not met *even one* of the basic criteria; much less the required three in order to establish a prima facie case of obviousness for all; further much less any; of the claims; all the claims should be allowed.

The Examiner may not, because of doubt that the invention is patentable, resort to speculation, unfounded assumption, or hindsight reconstruction to supply deficiencies in the factual basis for the rejection. See In re Warner, 379 F.2d 1011, 1017, 154 USPQ 173 (CCPA), cert. Denied, 389 U.S. 1057 (1968).

***Overwhelming Objective Evidence/Secondary Considerations—
All Claims Allowable***

Objective evidence relevant to the issue of obviousness must be evaluated by Office personnel. KSR International Co. v. Teleflex Inc. (KSR), 550 U.S. ___, 82 at 17-18, 148 USPQ at 467 (2007).

54. Even if alleged/supposed PMA was: #1. Date Accurate; #2. Content Accurate; #3. Enabling Disclosure/Subject Matter; and #4. A Prima Facie Case of Obviousness had been established; *all of which Applicant vehemently contends is not the case*, all the claims of the instant invention would still be allowable; for no fewer than the following *objective/secondary considerations*:

The Novel Features of the Independent Claims Produce New and Unexpected Results and Hence are Nonobvious and Patentable Over the (Alleged) Reference Under 35 USC 103

55. Applicant also submits that the afore-listed and detailed novel features of independent claims 181, 203, 225, 247 and 270-272 [as well as all the claims dependent thereon] are also unobvious and hence patentable under 103 since they produce new and unexpected results over alleged PMA; or any modification thereof.

These new and unexpected results are the ability of the present invention to--*for the first time in history*--provide a practical and economically feasible system for quickly, easily, automatically, and anonymously matching up to an unlimited, or virtually so, of benefit-

seeking entities with a wide range of diverse benefits (regardless of their origins or types, classes, categories, etc) made available from up to virtually any number of benefit providers; regardless of any affiliation they may have. The aggregation of so many varied benefits in one place at one time for the benefit of so many produces a compelling, synergistic, super-efficient “benefit-compounding” effect which produces disproportionate positive results for both the benefit-seeking entities and the benefit providers.

Because it is able to help far more people—*as well as millions and millions of other non-individual entities*--far more often in far more ways than the limited, constricted HelpWorks Web Edition; the new, unexpected, disproportionate, unsuggested, and surprising results provided by the present invention are far and away superior to HelpWorks WE, or any possible modification thereof [illustrated well in *Example/Dawn*; beginning on p. 16 of applicant’s specification]. The novel features of applicant’s method/system which effect these differences are, as stated, clearly recited in independent claims 181, 203, 225, 247, and 270-272.

In fact, one has only to visit the two very successful, infringing services of GovBenefits (GovBenefits.gov) and BenefitsCheckUp (BenefitsCheckUp.com) to see just some of the surprising, wonderful effects of the present invention’s New and Unexpected Results in “real world” action. [Exhibit C (A in first appeal); 4 pages]

It is well settled that these *Unexpected Results* by themselves would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

Commercial Success Proves Nonobviousness Over the (Alleged) Reference

56. Applicant has found two system/methods which infringe on applicant’s invention and have quickly achieved dramatic nationwide success. As noted in applicant’s previously PTO reviewed-and-approved Petition to Make Special, BenefitsCheckUp [BCU] (benefitscheckup.org), launched in June of 2001 and run by the National Council On the

Aging (NCOA); and GovBenefits (govbenefits.gov), launched in April of 2002 and run by the United States Department of Labor, are both—according to both media reports and at their respective web sites (ncoa.org in the case of BenefitsCheckUp)--already each processing 35,000+ (BCU) and 400,000+ (GovBenefits) system users each and every month. Their quick, phenomenal, little or no commercial advertising successes powerfully demonstrates and proves the value of the novel and unobvious features of the present invention over alleged PMA, or any modification thereof. [Evidence Appendix; Exhibit C (A in first appeal); 4 pages]

While Applicant has no commercial or other contractual interest in these two successful benefit matching method/systems; because they are infringing embodiments of the instant invention; they can reasonably and fairly stand as probative evidence of the commercial success of the instant invention.

It is well settled that these two *Commercial Successes* by themselves would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

Solution of Long-Felt and Unsolved Need Proves Nonobviousness Over the (Alleged) Reference

57. The present invention solves a long-felt but unsolved need. As explained and detailed in the present invention's specification—additionally backed by it's copious collection of non-patent prior art in the IDS--the need for a quick, easy, and accurate way to match benefit-seeking entities with the myriad benefits benefits (regardless of their origins or types, classes, categories, etc) for which they qualify for has been a painful, unmet need for many, many years; stretching back in the U.S. even to the advent of government-provided social welfare programs in the 1930's. Applicant's invention now quickly, easily, and automatically solves this dilemma; something alleged PMA, nor any combination modification.

It is well settled that this *Solution of Long-felt and Unsolved Need* by itself would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

***Competitive Recognition Proves Nonobviousness
Over the (Alleged) Reference***

58. As noted above, the present invention has been (apparently unknowingly) copied/ put into operation by at least two different infringers—The U.S. Department of Labor and the National Council on the Aging (NCOA). Moreover, James Firman, the President of NCOA, has made a number of statements to the media and via their website (ncoa.org) indicating that BenefitsCheckUp was the first web-based service ever to offer a wide range of benefits to those who are (or may be) qualified to receive them (in NCOA’s case, “senior” citizens). Also, laudatory statements are being made on a regular basis to the media by many US federal government office holders and officials praising the wonderful and hugely-popular, Dept. of Labor-run GovBenefits service. [Evidence Appendix; Exhibit C (A in first appeal); 4 pages] Proving the present invention to be nonobviousness over alleged PMA or any modification thereof.

While Applicant has no commercial or other contractual interest in these two commercially successful benefit matching method/systems; because they are embodiments of the instant invention; they can reasonably and fairly stand as probative evidence of the commercial success of the instant invention.

It is well settled that these two cases of *Competitive Recognition* by themselves would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

***Assumed Insolubility Proves Nonobviousness
Over the (Alleged) Reference***

59. Looking now again to applicant's extensive collection of non-patent prior art; we see that up to now those skilled in the art thought or found the problems solved by the invention to be insoluble. That is, the present invention converts the failure of others to come up with a quick, easy, and anonymous way to match benefit-seeking entities of any type directly with an up to unlimited number of (regardless of their origins or types, classes, categories, etc) the benefits (and the benefit providers) themselves.

These failures of prior-art workers indicates that a solution most certainly was not obvious. Proving the present invention to be nonobvious over alleged PMA or any modification of such.

It is well settled that this *Assumed Insolubility* would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

***New Principle of Operation Proves Nonobviousness
Over the (Alleged) Reference***

60. Instead of following a well-worn trail looking for incremental improvements in what already existed, the present invention utilizes a new "*anonymous, unlimited* (i.e. regardless of the benefits' origins or types, classes, categories, etc *as well as* unlimited benefit providers themselves) benefit aggregation and dissemination " principle of operation to blaze an exciting new trail; creating a far more effective and useful benefit identification and matching system/method unlike anything that ever existed before (again, as readily seen in the GovBenefits and BCU services). Clearly something neither alleged PMA, nor any modification thereof could ever provide.

It is well settled that this *New Principle of Operation* would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

***Different Problems Solved Proves Nonobviousness
Over the (Alleged) Reference***

61. Applicant's invention solves a different problem than the supposed reference; and such different problem is recited in the patent/claims. *In re Wright*, 6 USPQ 2d 1959 (1988). Unlike alleged PMA; which suggests no more than it being for humans; the instant invention enables benefit matching for all types of entities; doing so regardless of the benefits' origins or types, classes, categories, etc. Because the present invention does therefore solve a different (and far larger and more important) problem than alleged PMA, or any modification thereof, it is nonobvious.

It is well settled that these *Different Problems Solved* (e.g. non-human and all-entity benefit matching) would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

Lack of Implementation Proves Nonobviousness Over the (Alleged) Reference

62. If the present invention were in fact obvious, because of its many advantages, those skilled in the art surely would have implemented it long before the present invention's 4/12/2000 PPA priority date. Though a few (limited, constricted, difficult to use, non-Internet enabled, etc) benefit matching systems existed in some form(s) or another(s) since the mid to late 1990's, it wasn't until the June, 2001 launch of the Benefits Check Up service by the NCOA that (an infringing embodiment of) applicant's method/system was brought to the marketplace. That's over at least three years of time; which, given the explosive growth of Internet-based and other business method/systems during this time--including 1,000's of "business-method" patent filings plus non-patented operating and proposed systems/methods--clearly and unequivocally demonstrates and proves that the present invention was neither anticipated by nor made obvious by alleged PMA, or any modification thereof.

It is well settled that this *Lack of Implementation* would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

Misunderstood (Alleged) Reference Proves Nonobviousness

63. As Applicant has demonstrated throughout this brief; including claim by claim; the alleged/supposed PMA “reference”; even were it date accurate; is actually no reference at all. As detailed in this brief and previous Applicant responses; given its truly miniscule amount of information concerning HelpWorks Web Edition, it’s far, far away from being the necessary enabling disclosure the Examiner says it is. It is, respectfully yet frankly, not even close.

Therefore; because it cannot and does not teach; and cannot and does not suggest; what the Examiner relies upon as it supposedly teaching or suggesting, it has clearly been misunderstood.

It is well settled a *Misunderstood (Alleged) Reference*; such as is the case here; rebuts a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

***No Convincing Reasoning Proves Nonobviousness
Over the (Alleged) Reference***

64. First (and respectfully); as is readily apparent from the paucity of comments and analysis (such as it is) provided by Examiner concerning the instant invention in general; and even more so when directed to its claims in particular; no convincing reasoning has been provided as to why the claimed subject matter as a whole, including its differences over the supposed prior art, would have been obvious.

Furthermore; and relatedly to # [[55]] above; since so little information is contained in alleged PMA to begin with (again; only paragraphs four and five are even directed to Web Edition’s construction/operation); without relying on both the instant invention itself as an impermissible hindsight guide and/or resorting to considerable also impermissible speculation, supposition, and conjecture concerning the composition, structure, operational details, etc. of HelpWorks Web Edition; it’s simply impossible to properly support a case for; or arrive at a finding of; anticipation *or* obviousness.

For any of the claims.

Non-Patent Documents

65. Inventor/Applicant has reviewed the two additional non-patent "documents" ("U" and "V") which have been Examiner-added to the file as part of the most recent OA. For at least the reason that they are directed only to HelpWorks and not HelpWorks Web Edition, they do not disclose, teach, or even suggest the instant invention.

Furthermore and respectfully, as they, like alleged PMA, appear to originate from human-accessible, unsecured, date and content modifiable databases; also cannot legally be relied upon.

Concluding Comments

67. All dependent claims incorporate all the limitations of their respective independent claims and add additional subject matter which makes them a fortiori as well as independently patentable over alleged PMA.

68. At least in view of the foregoing, Applicant respectfully submits that all the pending claims, including those amended, are patentable over the cited alleged reference; including those subjected to alleged Official Notice. The preceding arguments are based only on the arguments in the OA, and therefore do not address patentable aspects of the invention that were not addressed by the Examiner in the OA. The claims may include other elements that are not shown, disclosed, taught, or suggested by the cited art.

69. Accordingly, the preceding arguments in favor of patentability are advanced without prejudice to other bases of patentability. Furthermore, the OA contains a number of statements reflecting characterizations of the related alleged art and the claims.

Regardless of whether any such statement or statements are identified herein, Applicant declines to necessarily subscribe to any statement or statements or characterization(s) in the OA.

70. Any comments made by the Inventor with respect to the position(s) take by the Board and/or Examiner are not to be construed as acquiescence with other position(s) of the Board and/or Examiner that have not been explicitly contested. Accordingly, the above argument(s) for patentability of the claims should not be construed as implying that there are not other valid reasons for patentability of said claims and/or other claims (i.e. as well demonstrated by the instant invention's extensive prosecution history).

71. If any of the claims are not now allowed as pro se Inventor submits they must be, it is kindly and respectfully requested that; at least as per 37 CFR 1.104(c)(2) including "*In exceptional cases, as to satisfy the requirements under 37 CFR 1.104(c)(2), and in pro se cases where the inventor is unfamiliar with patent law and practice, a more complete explanation may be needed.*" (MPEP 707), that Examiner identify and point out with particularity where *each* of the *specific* claim elements within each claim [detailed claim mapping] are purportedly located within any applied reference(s); including but not limited to alleged PMA. This identification/location/mapping requirement is legally the Examiner's/Office's alone:

The Examiner has the initial burden to set forth the basis for any rejection so as to put the patent applicant on notice of the reasons why the applicant is not entitled to a patent on the claim scope that he seeks - the so called "prima facie case." *In re Oetiker*, 977 F.2d 1443, 1445 (Fed. Cir. 1992); *In re Piasecki*, 745 F.2d 1468, 1472 (Fed. Cir. 1984) (the initial burden of proof is on the USPTO "to produce the factual basis for its rejection of an application under sections 102 and 103"). (quoting *In re Warner*, 379 F.2d 1011, 1016 (CCPA 1967)).

Given such; as a prima facie case has not been made (and which Inventor/Applicant maintains in any case *cannot* be made due at least to the lack of evidence in the record); Inventor/Applicant accordingly does not and has not as a result of this Response waived the Office's legal burden to make a prima facie case against any of the claims.

72. For the record, the instant invention's *Title, Abstract, Background of the Invention, Brief Summary of the Invention, Brief Description of the Drawings, Detailed Description of the Invention, Example, and Drawings* are of course in no way indicative or exhaustive of the present inventions numerous possible forms and embodiments. It is to be understood that none of these sections was at time of invention or is intended to ever, and should accordingly not be used to, either limit the scope of the claims or to limit the invention to any particular embodiment(s) or to (a) precise form(s).

For at least these many reasons, Applicant accordingly and respectfully requests the allowance of these remaining claims as well.

The Board and/or Examiner are kindly invited to call Inventor/Applicant at any time to discuss any items deemed necessary and/or desirable to the appeal and/or prosecution.

Respectfully submitted this 17th day of December, 2010.



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Inventor/Applicant/Appellant

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Session ID: 32965240

App.No.09/832,440; Morsa

Peter Martin Associates Announces Release of HelpWorks Web Edition.
Business Wire, Page: 2381, April 24 2001

Business Editors, Health/Medical Writers

NOTE TO MEDIA: Logo is available in a Smart News Release(TM)

on Business Wire's Home Page at www.businesswire.com and

at www.newstream.com

CHICAGO—(BW HealthWire)—April 24, 2001

The premier provider of social service agency software introduces a Web version of the HelpWorks(TM) eligibility screening tool, offering broad access to information on benefits and services.

HelpWorks Web Edition(TM) targets under-enrollment of children and families for critical services such as Food Stamps, the Child Health Insurance Program (CHIP), and Energy Assistance programs.

Peter Martin Associates today announced the release of a Web-based version of the company's groundbreaking HelpWorks(TM) eligibility screening software package. HelpWorks(TM) leverages expert systems technology to simplify the assessment of people's eligibility for benefits and services. People in need can now find out what they're eligible for and apply for benefits—all without having to visit multiple offices and or fill out repetitive paper application forms.

HelpWorks(TM) stores program rules in a database, then conducts a guided, personalized interview to quickly assess eligibility. If an individual or family is found to be eligible for a given program, HelpWorks(TM) matches individuals with appropriate service providers. The program can then transmit an electronic application, streamlining the entire process of accessing services.

"We think we're on the cutting edge of a revolution in the way human services, and more broadly government services, are delivered," says Edward Hamlin, founder and CEO of Peter Martin Associates. "By storing complex eligibility rules, formulas and rate tables in a database, HelpWorks(TM) frees caseworkers to focus on providing direct service to their clients."

The State of Minnesota's Biennial State Social Services Plan recently showcased HelpWorks(TM) in Clay County as an "innovative practice." Cynthia Sillers, Coordinator of the Clay County Joint Powers Collaborative, said, "The Collaborative Partners in Clay County selected HelpWorks Web as

a technological tool to vastly improve our system for connecting people to services in a rapidly changing world. We are confident that HelpWorks Web will be an asset as we continue to address quality of life issues for children and families in this community."

HelpWorks(TM) is now a core component of New Jersey's One Ease E-Link electronic government initiative. Bill Kowalski, Director of the New Jersey One Ease E-Link Initiative, says, "One Ease E-Link (OEL) offers professionals a business-to-business portal specifically for human services, and HelpWorks is a critical component of that content. HelpWorks is easy to use, yet powerful. It offers workers results on a broad and complex range of eligibility and provider information. What's more, OEL can add and update the library of programs as needed or as policies or programs change."

HelpWorks Web Edition(TM) is targeted at professional social workers and other service providers as well as public institutions that offer information kiosks and Web connections.

HelpWorks Web Edition(TM) is available as a hosted solution and on a conventional software license basis. PMA has announced plans to offer HelpWorks(TM) as a monthly subscription service beginning in the third quarter of 2001.

About Peter Martin Associates, Inc.

Peter Martin Associates (PMA) is the premier provider of software designed for public and private social service agencies, focusing on family-centered case management, information and referral, rules-based assessment, and eligibility screening. Products are available on a broad range of platforms, from laptops to the Internet. For more information, visit <http://www.petermartin.com>.

For further information on HelpWorks Web Edition(TM), visit <http://www.helpworks.com>.

Note: A Photo is available at URL: <http://www.businesswire.com/cgi-bin/photo.cgi?pw.042401/bb3>

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Typed Drawing

Word Mark **HELPWORKS WEB EDITION**
Goods and Services (ABANDONED) IC 009. US 021 023 026 036 038. G & S: Computer software for use in health and human services eligibility screening, determination, management, referral and reporting downloadable software for use in health and human services eligibility screening, determination, management, referral and reporting. FIRST USE: 20000630. FIRST USE IN COMMERCE: 20000630
(ABANDONED) IC 042. US 100 101. G & S: Providing technical support services via telephone, on-site, on-line or web-based services, for users of health and human services eligibility screening, determination, management, referral and reporting software. FIRST USE: 20000630. FIRST USE IN COMMERCE: 20000630
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Assignment Recorded ASSIGNMENT RECORDED
Attorney of Record Mary E Zaug

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Abandonment Date May 3, 2005

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LATEST NEWS

> Expanding Your Benefits Connection, GovBenefits.gov Second Anniversary April 29, 2004



GovBenefits.gov is expanding your benefits connection! As the two-year anniversary of the award-winning GovBenefits.gov website is celebrated, we are pleased to announce that the site is expanding to better serve you. The new GovBenefits.gov includes Spanish-language content with the debut of GovBenefits.gov En Español and additional State program information. The new GovBenefits.gov site was redesigned to make it easier for you to find the government benefit and assistance programs that meet your specific needs. In addition to all citizen-focused Federal benefit programs, GovBenefits.gov contains benefit program information from all 50 U.S. States, helping citizens across the country save time and avoid the hassle of trying to figure out which government agency to contact for assistance.

The expansion of GovBenefits.gov increases the ability of the site to help citizens learn more about the government benefit and assistance programs that may be available to them. GovBenefits.gov En Español offers Spanish-speaking communities even greater access to Federal and State benefit programs, while the expanded State benefit information gives citizens additional avenues to locate State-level assistance programs.

Since its launch in April 2002, GovBenefits.gov has provided more than 10 million visitors with information on government benefit and assistance programs, and generated nearly 1.7 million citizen referrals to benefit programs. GovBenefits.gov contains information on more than 500 Federal and State benefit and assistance programs.

For information about the GovBenefits.gov Second Anniversary Event, please contact us via email at GovBenefitsMedia@dol.gov.

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PRESS RELEASE

Nov 13, 2003

GovBenefits.gov Adds New State Programs and Redesigns Homepage; Site Now Includes Information on 48 State and 419 Federal Programs

WASHINGTON - The U.S. Department of Labor, in conjunction with the Office of Management and Budget, today announced the launch of a new version of GovBenefits.gov, a Web site developed to serve citizens as the first government-wide resource for citizen benefit information and eligibility screening. In addition to all citizen-focused federal benefit programs, this new version of GovBenefits.gov also includes state benefit programs from: Alabama, Arizona, Arkansas, California, Colorado, Georgia, Indiana, Iowa, Kentucky, Michigan, Minnesota, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, South Carolina, South Dakota and Utah. The State benefit program information that can now be found on the site includes: Food Stamps, Medicaid, Temporary Assistance for Needy Families and State Children's Health Insurance Programs. With these enhancements, GovBenefits.gov has taken concrete steps toward providing a single place for both Federal and State benefit program information.

GovBenefits.gov has also undergone important upgrades:

Homepage Redesign - Includes new look and feel, and more ways for visitors to obtain Federal and State benefit information.

More Streamlined Questionnaire - Results in significantly fewer questions for visitors to answer and allows visitors to stop at any time while completing questionnaire and see what benefits are available up to that point.

Greater Access - Provides additional ease of use for those who employ screen readers or other assistive devices.

GovBenefits.gov Survey - Helps measure customer satisfaction and guide future improvements.

To view all of these the new site features, visit: <http://www.govbenefits.gov/>.

"GovBenefits.gov is dedicated to making government benefit information easier for citizens to obtain" said Patrick Pizzella, Assistant Secretary for Administration and Management and Chief Information Officer at the Department of Labor. "One important way the site has done that is by exploring the previously uncharted territory of providing a single place for both Federal and State benefit program information."

GovBenefits.gov is one of 24 key initiatives that comprise the President's E-Government Strategy, an integral part of President Bush's Management Agenda, which focuses on: creating a more accessible government, saving taxpayer dollars, and streamlining citizen-to-government transactions. GovBenefits.gov is the collaborative effort of 10 federal agencies including: Departments of Labor (managing partner), Agriculture, Education, Energy, Health and Human Services, Housing and Urban Development, State, Veterans Affairs, Homeland Security, and the Social Security Administration.

App No. 09/832,440/MARS A



The National Council on the Aging

Press Room: News Archive

BenefitsCheckUp® Tops One Million Mark September 16, 2003

WASHINGTON, DC -- Since its national launch in June 2001, BenefitsCheckUp - the first Web-based service designed to help older Americans, their families, caregivers and community organizations determine quickly and easily what programs and benefits seniors may qualify for and how to claim them - has issued more than one million eligibility reports.

"This is a significant milestone, but we have a long way to go" said NCOA President James Firman. NCOA and its partners, including America Online's corporate investment department that hosts BenefitsCheckUp on a pro bono basis, anticipate that five million will use the service over the next four years.

More than 100,000 seniors have found significant prescription savings using BenefitsCheckUpRx, a new feature added in February that allows you to search only for savings programs related to medications.

BenefitsCheckUp is a free and confidential service which can be accessed through the Internet at www.benefitscheckup.org. When visiting the site, users complete a brief questionnaire which generates a personalized report specifying a list of programs they may be eligible for and detailed instructions on how to enroll.

Among the programs included are those that help seniors find income support, prescription drug savings, government health programs, energy assistance, property tax relief, nutrition programs, in-home services, Veteran's programs as well as volunteer, educational and training programs.

Of all persons screened thus far, some 26 percent were eligible for, but not receiving food stamps, and 17 percent were eligible for, but not receiving Medicaid. Almost 40 percent were eligible for Weatherization benefits.

A national mobilization effort to expand the reach of the site now involves hundreds of organizations and provides outreach to low-income seniors. There are currently grassroots programs in Baltimore, Chicago, Cleveland, Dallas, Denver, Philadelphia, and the state of Washington. In addition, the new and improved BenefitsCheckUp @ Organizational Edition is now available on an annual subscription basis to organizations that can use it to reach out into communities to help even more seniors.

NCOA and its national outreach partners such as AARP, Catholic Charities, USA, Lutheran Services in America, The Salvation Army, Volunteers of America, United Jewish Communities, Jewish Family and Children's Services, Alliance for Children and Families, and the American Association of Homes and Services for the Aging are mobilizing more than 2,000 community organizations across the country to find and help isolated seniors who could benefit from the service. A Spanish language version of BenefitsCheckUp for use by community organizations will be available in the fall of 2003.

BenefitsCheckUp @ is supported by the following: AARP, AOL Time Warner Foundation, Archstone Foundation, FJC - A Foundation of Donor Advised Funds, Lucent Technologies Family Care Development Fund, Pfizer, Pharmaceutical Research and Manufacturers of America (PhRMA), TogetherRX, and the U.S. Department of Commerce. They make BenefitsCheckUp @ available as a free service to the public. The Web site is hosted by AOL's GovernmentGuide.com.

The Organizational Edition and the community outreach effort are funded by Atlantic Philanthropies, the U.S. Department of Commerce, and The Commonwealth Fund.

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Founded in 1950, The National Council on the Aging is the nation's first organization dedicated to promoting the dignity, independence, well-being, and contributions of older Americans. NCOA serves as a national voice and powerful advocate on behalf of older Americans. NCOA is an innovator, developing programs such as BenefitsCheckUp, Foster Grandparents and Family Friends. NCOA is an activator, working with its thousands of community organization members nationwide to provide needed services to older people. For more information on NCOA, visit www.ncoa.org.

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App. No. 09/832, 440/1705A



Claims Appendix

I claim:

181. A system comprising:

storing in a physical memory device benefit information, benefit provider information, and benefit correlation information;

inputting at least a sub-set of an individuals demographic, geographic, and/or psychographic data into a processing device by means of at least one data entry device in electronic communication with the processing device;

said processing device analyzing said individuals data, said benefit provider information, and/or said benefit correlation information to determine whether any benefit providers are offering any benefits applicable to said individuals data;

generating a message to at least one receiving device to inform said individual, at least in part via a computer compatible network, of any available benefits applicable to said individuals data.

182. The system of claim 181, further comprising displaying two or more of said benefits to said

individual in a manner selected from the group consisting of benefit class or category; value of benefits; cost, if any, of benefits; importance of benefits; relevance of benefits; ease of use of benefits; expiration date, day, time of benefits; creation date, day, time of benefits; type of benefits; physical proximity of said individual to one or more of said benefit providers.

183. The system of claim 182, further comprising enabling said individual to self-select said manner of benefits listing display.

184. The system of claim 181, further comprising storing in at least one physical memory device at least a portion of said individuals data.

185. The system of claim 184, further comprising updating the status and or availability of benefits for said individual as; from one or more of the following:
at least one of said benefit providers intends to or actually does modify the existing benefit qualification parameters for one or more of said providers benefits; and or
at least one of said benefit providers intends to or actually does modify or eliminate an existing benefit; or offers one or more benefits not previously offered; and or
one or more individual applicable benefits offered by one or more benefit providers new to, or returning to, said system are added to said system.

186. The system of claim 185, further comprising providing real time or later notification to said individual of said updating via at least one receiving device.

187. The system of claim 186, further comprising enabling the selection or election of when said individual receives said notifications.

188. The system of claim 184, further comprising requiring said individual to update said individuals data as a condition of said individual continuing to remain a system user.

189. The system of claim 181, further comprising enabling said individual and or at least one of said benefit providers to pay for said system access and use from at least one from the group of:

- on a per benefit disclosed basis;
- on a per benefit received basis;
- on a per benefit utilized basis;
- through said individuals relinquishment of at least a portion of at least one of said benefits;
- through the cash or cash equivalent payment of some part or percentage of the value of at least one of said benefits.

190. The system of claim 181, further comprising enabling the receiving directly and or via one or more third party intermediaries of monetary revenue and or other value from at least one benefit provider.

191. The system of claim 181, further comprising enabling one or more from the group of:

- updating benefits data;
- modifying benefits data;
- removing benefits data;
- adding new benefits data.

192. The system of claim 181, wherein said message comprises revealing and or providing at least one from the group of:

- one or more of said benefits not applicable to individual;
- one or more of said benefit providers not applicable to individual;
- one or more of said benefit providers benefit application forms;
- one or more of said benefit providers contact information;
- a map for and or directions to one or more of said benefit providers.

193. The system of claim 181, further comprising at least one from the group of:

- connecting said individual with at least one of said plurality of benefit providers;
- said individual to interact with at least one of said benefit providers;
- at least one of said benefit providers to offer said benefits to said individual;
- the completion of one or more application forms, when applicable, by said individual;
- assisting said individual in the completion of one or more application forms;
- transmitting at least one benefit approval for said individual by at least one of said benefit providers;
- transmitting an acceptance of at least one of said benefits by said individual;
- receiving at least one of said benefits by said individual;
- utilizing at least one of said benefits by said individual.

194. The system of claim 193, further comprising performing at least one from said group in real or near real time.

195. The system of claim 181, wherein said individual benefits and or benefits information is shared with at least one other entity via said system.

196. The system of claim 181, wherein said message includes at least one benefit for which said individual:

may qualify for; and or

may not qualify for; and or

does qualify for; and or

does not qualify for.

197. The system of claim 181, wherein said message informs individual of at least one benefit contained within said memory without regards to at least some part of said individuals data.

198. The system of claim 181, wherein one or more of said benefit providers submits said benefit information and or said benefits directly into said system.

199. The system of claim 181, wherein at least one of said benefit information and or said benefits from at least one of said benefit providers is delivered directly into said system via at least one third party intermediary acting on behalf of at least one of said benefit providers.

200. The system of claim 181, wherein said available benefits varies according to:

the amount of said individuals data; and or

the completeness of said individuals data.

201. The system of claim 181, wherein at least a partial set of phantom individuals data is inputted; wherein said phantom data does not belong to nor correspond to said individuals actual factual data.
202. The system of claim 181, wherein said individuals data includes individuals identification information.
203. A method comprising:
- storing in a physical memory device benefit information, benefit provider information, and benefit correlation information;
 - inputting at least a sub-set of an individuals demographic, geographic, and/or psychographic data into a processing device by means of at least one data entry device in electronic communication with the processing device;
 - said processing device analyzing said individuals data, said benefit provider information, and/or said benefit correlation information to determine whether any benefit providers are offering any benefits applicable to said individuals data;
 - generating a message to at least one data receiving device to inform said individual, at least in part via a computer compatible network, of any available benefits applicable to said individuals data.
204. The method of claim 203, further comprising displaying two or more of said benefits to said individual in a manner selected from the group consisting of benefit class or category; value of

benefits; cost, if any, of benefits; importance of benefits; relevance of benefits; ease of use of benefits; expiration date, day, time of benefits; creation date, day, time of benefits; type of benefits; physical proximity of said individual to one or more of said benefit providers.

205. The method of claim 204, further comprising enabling individual self-selecting said manner of displaying said benefits.

206. The method of claim 203, further comprising storing in at least one physical memory device at least a portion of said individuals data.

207. The method of claim 206, further comprising updating the status and or availability of benefits for said individual as; from one or more of the following:
at least one of said benefit providers intends to or actually does modify the existing benefit qualification parameters for one or more of said providers benefits; and or
at least one of said benefit providers intends to or actually does modify or eliminate an existing benefit; or offers one or more benefits not previously offered; and or
one or more individuals applicable benefits offered by one or more benefit providers new to, or returning to, said system are added to said system.

208. The method of claim 207, further comprising providing real time or later notification to said individual of said updating via at least one receiving device.

209. The method of claim 208, further comprising selecting or electing when said individual receives said notifications.
210. The method of claim 206, further comprising requiring said individual to update said individuals data as a condition of said individual continuing to remain a system user.
211. The method of claim 203, further comprising enabling said individual and or at least one of said benefit providers to pay for said system access and use from at least one from the group of:
- on a per benefit disclosed basis;
 - on a per benefit received basis;
 - on a per benefit utilized basis;
 - through said individuals relinquishment of at least a portion of at least one of said benefits;
 - through the cash or cash equivalent payment of some part or percentage of the value of at least one of said benefits.
212. The method of claim 203, further comprising receiving directly and or via one or more third party intermediaries monetary revenue and or other value from at least one benefit provider.
213. The method of claim 203, further comprising one or more of:
- updating benefits data;
 - modifying benefits data;
 - removing benefits data;
 - adding new benefits data.

214. The method of claim 203, wherein said message comprises revealing and or providing at least

one from the group of:

one or more of said benefits not applicable to individual;

one or more of said benefit providers not applicable to individual;

one or more of said benefit providers benefit application forms;

one or more of at least one of said benefit providers contact information;

a map for and or directions to one or more of said benefit providers.

215. The method of claim 203, further comprising at least one from the group of:

connecting said individual with at least one of said plurality of benefit providers;

said individual interacting with at least one of said benefit providers;

at least one of said benefit providers offering said benefits to said individual;

completing one or more application forms, when applicable, by said individual

assisting said individual in the completing of one or more application forms;

transmitting at least one benefit approval for said individual by at least one of said benefit providers;

transmitting an acceptance of at least one of said benefits by said individual;

receiving at least one of said benefits by said individual;

utilizing at least one of said benefits by said individual.

216. The method of claim 215, further comprising performing at least one from said group in real or near real time.

217. The method of claim 203, further comprising enabling the sharing of said individuals benefits and or benefits information with at least one other entity.
218. The method of claim 203, further comprising including in said message at least one benefit for which said individual:
may qualify for; and or
may not qualify for; and or
does qualify for; and or
does not qualify for.
219. The method of claim 203, wherein said message informs individual of at least one benefit contained within said memory without regards to at least some part of said individuals data.
220. The method of claim 203, further comprising enabling one or more of said benefit providers to submit said benefit information and or said benefit or benefits directly into said system.
221. The method of claim 203, wherein at least one of said benefit information and or said benefits from at least one of said benefit providers is delivered in/to said memory device and/or said processing device via at least one third party intermediary acting on behalf of at least one of said benefit providers.
222. The method of claim 203, wherein said available benefits varies according to:

the amount of said individuals data; and or

the completeness of said individuals data.

223. The method of claim 203, further comprising the step of inputting at least some phantom individuals data; wherein said phantom data does not belong to nor correspond to said individuals actual factual data.

224. The method of claim 203, wherein said individual data includes individuals identification information.

225. A system comprising:

storing in a memory in the system benefit information, benefit provider information, and benefit correlation information;

inputting into said system a set of a businesses and or governments and or educational institutions and or non-profits demographic, geographic, and/or psychographic data for said business, government, educational institution, or non-profit.

analyzing said business, government, educational institution, or non-profit data, said benefit provider information, and said benefit correlation information to determine whether any benefit providers are offering potentially applicable benefits for said data and whether said data satisfies requirements for obtaining said potentially applicable benefits;

automatically generating a message to directly inform said business, government, educational institution, or non-profit of any available benefits applicable to said business, government, educational institution, or non-profit data.

226. The system of claim 225, further comprising displaying two or more of said benefits to said business, government, educational institution, or non-profit in a manner selected from the group consisting of benefit class or category; value of benefits; cost, if any, of benefits; importance of benefits; relevance of benefits; ease of use of benefits; expiration date, day, time of benefits; creation date, day, time of benefits; type of benefits; physical proximity of said business, government, educational institution, or non-profit to one or more of said benefit providers.

227. The system of claim 226, further comprising enabling said business, government, educational institution, or non-profit to self-select said manner of benefits listing display.

228. The system of claim 225, further comprising storing in at least one physical memory device at least a portion of said business, government, educational institution, or non-profits data.

229. The system of claim 228, further comprising updating the status and or availability of benefits for said business, government, educational institution, or non-profit as:
at least one of said benefit providers intends to or actually does modify the existing benefit qualification parameters for one or more of said providers benefits; and or
at least one of said benefit providers intends to or actually does modify or eliminate an existing benefit; or offers one or more benefits not previously offered; and or

one or more business, government, educational institution, or non-profit applicable benefits offered by one or more benefit providers new to, or returning to, said system are added to said system.

230. The system of claim 229, further comprising providing real time or later notification to said business, government, educational institution, or non-profit of said updating via at least one receiving device.

231. The system of claim 230, further comprising enabling the selection or election of when said business, government, educational institution, or non-profit receives said notifications.

232. The system of claim 228, further comprising requiring said business, government, educational institution, or non-profit to update said business, government, educational institution, or non-profit's data as a condition of said business, government, educational institution, or non-profit continuing to remain a system user.

233. The system of claim 225, further comprising enabling said business, government, educational institution, or non-profit and or at least one of said benefit providers to pay for said system access and use from at least one from the group of:

- on a per benefit disclosed basis;
- on a per benefit received basis;
- on a per benefit utilized basis;

through said business, government, educational institution, or non-profits relinquishment of at least a portion of at least one of said benefits;

through the cash or cash equivalent payment of some part or percentage of the value of at least one of said benefits.

234. The system of claim 225, further comprising enabling the receiving directly and or via one or more third party intermediaries of monetary revenue and or other value from at least one benefit provider.

235. The system of claim 225, further comprising enabling one or more from the group of:

updating benefits data;

modifying benefits data;

removing benefits data;

adding new benefits data.

236. The system of claim 225, wherein said message comprises revealing and or providing at least one from the group of:

one or more of said benefits not applicable to business, government, educational institution, or non-profit;

one or more of said benefit providers not applicable to business, government, educational institution, or non-profit;

one or more of said benefit providers benefit application forms;

one or more of said benefit providers contact information;

a map for and or directions to one or more of said benefit providers.

237. The system of claim 225, further comprising at least one from the group of:

connecting said business, government, educational institution, or non-profit with at least one of said plurality of benefit providers;

said business, government, educational institution, or non-profit to interact with at least one of said benefit providers;

at least one of said benefit providers to offer said benefits to said business, government, educational institution, or non-profit;

the completion of one or more application forms, when applicable, by said business, government, educational institution, or non-profit;

assisting said business, government, educational institution, or non-profit in the completion of one or more application forms;

transmitting at least one benefit approval for said business, government, educational institution, or non-profit by at least one of said benefit providers;

transmitting an acceptance of at least one of said benefits by said business, government, educational institution, or non-profit;

receiving at least one of said benefits by said business, government, educational institution, or non-profit;

utilizing at least one of said benefits by said business, government, educational institution, or non-profit.

238. The system of claim 237, further comprising performing at least one from said group in real or near real time.

239. The system of claim 225, wherein said business, government, educational institution, or non-profit benefits and or benefits information is shared with at least one other entity via said system.

240. The system of claim 225, wherein said message includes at least one benefit for which said business, government, educational institution, or non-profit:
may qualify for; and or
may not qualify for; and or
does qualify for; and or
does not qualify for

241. The system of claim 225, wherein said message informs business, government, educational institution, or non-profit of at least one benefit contained within said memory without regards to at least some part of said business, government, educational institution, or non-profit data.

242. The system of claim 225, wherein one or more of said benefit providers submits said benefit information and or said benefits directly into said system.

243. The system of claim 225, wherein at least one of said benefit information and or said benefits from at least one of said benefit providers is delivered directly into said system via at least one third party intermediary acting on behalf of at least one of said benefit providers.
244. The system of claim 225, wherein said available benefits varies according to:
the amount of said business, government, educational institution, or non-profits data; and or
the completeness of said business, government, educational institution, or non-profits data.
245. The system of claim 225, wherein at least a partial set of phantom business, government, educational institution, or non-profits data is inputted; wherein said phantom data does not belong to nor correspond to said business, government, educational institution, or non-profits actual factual data.
246. The system of claim 225, wherein said business, government, educational institution, or non-profits data includes business, government, educational institution, or non-profits identification information.
247. A method comprising:
storing in a physical memory device benefit information, benefit provider information, and
benefit correlation information;

inputting at least a sub-set of a business, government, educational institution, or non-profits demographic, geographic, and/or psychographic data into a processing device by means of at least one data entry device in electronic communication with the processing device;
said processing device analyzing said business, government, educational institution, or non-profits data, said benefit provider information, and/or said benefit correlation information to determine whether any benefit providers are offering any benefits applicable to said business, government, educational institution, or non-profits data;
generating a message to at least one data receiving device to inform said business, government, educational institution, or non-profit of any available benefits applicable to said business, government, educational institution, or non-profits data.

248. The method of claim 247, further comprising the step of displaying two or more of said benefits to said business, government, educational institution, or non-profit in a manner selected from the group consisting of benefit class or category; value of benefits; cost, if any, of benefits; importance of benefits; relevance of benefits; ease of use of benefits; expiration date, day, time of benefits; creation date, day, time of benefits; type of benefits; physical proximity of said business, government, educational institution, or non-profit to one or more of said benefit providers.

249. The method of claim 248, further comprising enabling business, government, educational institution, or non-profit self-selecting said manner of displaying said benefits.

250. The method of claim 247, further comprising storing in at least one physical memory device at least a portion of said business, government, educational institution, or non-profits data.

251. The method of claim 250, further comprising updating the status and or availability of benefits for said business, government, educational institution, or non-profit as:
at least one of said benefit providers intends to or actually does modify the existing benefit qualification parameters for one or more of said providers benefits; and or
at least one of said benefit providers intends to or actually does modify or eliminate an existing benefit; or offers one or more benefits not previously offered; and or
one or more business, government, educational institution, or non-profits applicable benefits offered by one or more benefit providers new to, or returning to, said system are added to said system.

252. The method of claim 251, further comprising providing real time or later notification to said business, government, educational institution, or non-profit of said updating via at least one receiving device.

253. The method of claim 252, further comprising selecting or electing when said business, government, educational institution, or non-profit receives said notifications.

254. The method of claim 250, further comprising requiring said business, government, educational institution, or non-profit to update said business, government, educational institution, or non-

profits data as a condition of said business, government, educational institution, or non-profit continuing to remain a system user.

255. The method of claim 247, further comprising enabling said business, government, educational institution, or non-profit and or at least one of said benefit providers to pay for said system access and use from at least one from the group of:

on a per benefit disclosed basis;

on a per benefit received basis;

on a per benefit utilized basis;

through said business, government, educational institution, or non-profits relinquishment of at least a portion of at least one of said benefits;

through the cash or cash equivalent payment of some part or percentage of the value of at least one of said benefits.

256. The method of claim 247, further comprising receiving directly and or via one or more third party intermediaries monetary revenue and or other value from at least one benefit provider.

257. The method of claim 247, further comprising one or more of:

updating benefits data;

modifying benefits data;

removing benefits data;

adding new benefits data.

258. The method of claim 247, wherein said message comprises revealing and or providing at least one from the group of:

one or more of said benefits not applicable to business, government, educational institution, or non-profit;

one or more of said benefit providers not applicable to business, government, educational institution, or non-profit;

one or more of said benefit providers benefit application forms;

one or more of at least one of said benefit providers contact information;

a map for and or directions to one or more of said benefit providers.

259. The method of claim 247, further comprising at least one from the group of:

connecting said business, government, educational institution, or non-profit with at least one of said plurality of benefit providers;

said business, government, educational institution, or non-profit interacting with at least one of said benefit providers;

at least one of said benefit providers offering said benefits to said business, government, educational institution, or non-profit;

completing one or more application forms, when applicable, by said business, government, educational institution, or non-profit;

assisting said business, government, educational institution, or non-profit in the completing of one or more application forms;

transmitting at least one benefit approval for said business, government, educational institution, or non-profit by at least one of said benefit providers;

transmitting an acceptance of at least one of said benefits by said business, government, educational institution, or non-profit;

receiving at least one of said benefits by said business, government, educational institution, or non-profit;

utilizing at least one of said benefits by said business, government, educational institution, or non-profit.

260. The method of claim 257, further comprising performing at least one from said group in real or near real time.

261. The method of claim 247, further comprising enabling the sharing of said business, government, educational institution, or non-profits benefits and or benefits information with at least one other entity.

262. The method of claim 247, further comprising including in said message at least one benefit for which said business, government, educational institution, or non-profit:
may qualify for; and or
may not qualify for; and or
does qualify for; and or
does not qualify for.

263. The method of claim 247, wherein said message informs business, government, educational institution, or non-profit of at least one benefit contained within said memory without regards to at least some part of said business, government, educational institution, or non-profits data.
264. The method of claim 247, further comprising enabling one or more of said benefit providers to submit said benefit information and or said benefit or benefits directly into said system.
265. The method of claim 203, wherein at least one of said benefit information and or said benefits from at least one of said benefit providers is delivered in/to said memory device and/or said processing device via at least one third party intermediary acting on behalf of at least one of said benefit providers.
266. The method of claim 247, wherein said available benefits varies according to:
the amount of said business, government, educational institution, or non-profits data; and or
the completeness of said business, government, educational institution, or non-profits data.
267. The method of claim 247, further comprising inputting at least some phantom business, government, educational institution, or non-profits data; wherein said phantom data does not belong to nor correspond to said business, government, educational institution, or non-profits actual factual data.

268. The method of claim 247, wherein said business, government, educational institution, or non-profits data includes business, government, educational institution, or non-profits identification information.

269. A method comprising:

- receiving benefit information via at least one physical data transmission device;
- receiving a benefit information request via at least one physical data transmission device;
- storing said benefit information request on at least one physical memory device;
- querying, via a physical querying device, a central benefit information storage system to determine if any benefits exist for said benefit information request;
- benefit information requester receiving, via a physical data receiving device, some subset of said benefit information;
- said requester thereafter receiving, utilizing said stored request and via a physical data receiving device, at least one automatically generated updated subset of said benefit information;
- wherein said method is operated at least in part via a computer compatible network.

270. (cancelled)

271. A benefit information match mechanism comprising:

- storing a plurality of benefit registrations on at least one physical memory device;
- receiving via at least one data transmission device a benefit request from a benefit desiring seeker;

resolving said benefit request against said benefit registrations to determine one or more matching said benefit registrations;
automatically providing to at least one data receiving device benefit results for said benefit requesting seeker;
wherein said match mechanism is operated at least in part via a computer compatible network.

272. A method of generating a benefit result list in real or substantially real time in response to a benefit match request from a benefit seeker using a computer network, comprising:
maintaining at least one database stored in and/or on an article of manufacture including a plurality of benefit listings;
receiving a benefit match request transmitted from an article of manufacture from said seeker, said request including said seekers criteria;
identifying using a processing device those of said benefit listings having criteria which generate a match with said match request;
generating automatically a message to a receiving article of manufacture to inform said seeker via said computer network of those of said benefits which match said seekers criteria.

Evidence Appendix

Exhibit A: Two page Dialog/Business Wire/Gale Group HelpWorks Web Edition 2001 launch press release.

Exhibit B: Two page USPTO HelpWorks Web Edition trademark application.

Exhibit C: Four pages of GovBenefits/BenefitsCheckUp information.

Related Proceedings Appendix

None